PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/540,587			ing Date 25/2005	To be Mailed
	AF	AS FILE	SMALL	ENTITY 🛛	OR		HER THAN				
⊢	FOR		NUMBER FILED		(Column 2) NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	\neg	N/A		N/A	ı	N/A	122(0)		N/A	TLL (0)
	SEARCH FEE		N/A		N/A	i	N/A			N/A	
	(37 CFR 1.16(k), (j), (EXAMINATION FE (37 CFR 1.16(o), (p), (E	N/A		N/A	ı	N/A			N/A	
	FAL CLAIMS CFR 1.16(i))	G((q))	minus 20 = *				x \$ =		OR	x s =	
IND	EPENDENT CLAIM CFR 1,16(h))	s	minus 3 = *			ı	x \$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 ional 50 s	gs exceed 100 n size fee due for each n thereof. See CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	L	ı	TOTAL	L
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	03/30/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	• 10	Minus	 20	= 0		X \$26 =	0	OR	x s =	
	Independent (37 CFR 1.16(h))	• 2	Minus	 3	= 0	1	X \$110 =	0	OR	x s =	
	Application Size Fee (37 CFR 1.16(s))										
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
						•	TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus	**		l	x \$ =		OR	x s =	
M	Independent (37 CFR 1.16(h))		Minus	***		1	x \$ =		OR	x \$ =	
ä	Application Size Fee (37 CFR 1.16(s))]					
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
	•								OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: "If the "Highest Number Prevousy Paid For IN THIS SPACE is less than 30, enter "20". "If the "Highest Number Prevousy Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Prevousy Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Prevousy Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Prevousy Paid For IN THIS SPACE is less than 3, enter "3". MARQUITA D. JONES/ MARQUITA D. JONES/ The Highest Number Prevousy Paid For IN THIS SPACE is less than 3, enter "3".											

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